ServiceWomensActionNetwork_FAV_SB904

Uploaded by: Barber, Beshauna

To Whom It May Concern,

We are writing in support of the Sheila E. Hixson Behavioral Health Services Matching Grant Program for Service Members & Veterans (SB0904/HB1515) that calls for the creation of a state fund to provide matching grants to community-based organizations providing evidence-based behavioral health treatments for service members (including the Guard and Reserves), veterans, and their family members. There is great need for behavioral health services among veterans, service members and their families in Maryland. There are approximately 399,000 veterans living in Maryland, of which an estimated 24,000 have been deployed to Iraq or Afghanistan. Across the state, approximately 10,000 veterans are dealing with post-traumatic stress or major depression. We know that veterans comprise 18% of all deaths by suicide in Maryland and this group is twice as likely as non-veterans to die by suicide. Community-based organizations play a crucial role in providing timely, evidence-based services that fill the existing gaps in the VA system.

The Service Women's Action Network (SWAN) is the voice of women who have served or are currently serving in the military. We are a member-driven network dedicated to supporting, connecting and advocating for the individual and collective needs of service women; past, present and future. SWAN is the only organization solely focused on the needs of service women *and* women veterans. We understand that the experiences that women have while in uniform have profound impacts when they leave military service. Their experiences are uniquely different from men's experiences and must be acknowledged and addressed differently.

On a range of indicators military women's mental health is not good. Service women, who often deal with a culture of bias, harassment and sometimes assault, as well as long family separations and combat deployments, can have long-term mental health impacts that must be acknowledged and addressed while on active duty and when they become veterans. Women veterans are significantly more likely to face mental health challenges than civilian women and veteran men. Department of Veteran Affairs (VA) data shows that women veterans are 250% more likely than civilian women to commit suicide. Women's mental wellness appears to be negatively impacted during military service and this impact follows them after they leave service. In SWAN's 2017 mental wellness survey, 60% of participants said that military service had a negative impact on their mental wellbeing. Furthermore, 61% of survey participants said they have been clinically diagnosed with some form of depression and 51% have received a clinical diagnosis of a stress injury. Finally, 20% said they had engaged in some form of self-harm.

The VA clearly has not been able to adequately meet this growing need. Having a strong network of community-based organizations that understand military culture and in particular, the needs of women, is critical. The Sheila E. Hixson Behavioral Health Services Matching Grant Program is a step towards solving the problem. We encourage its passage.

Sincerely,

Deshauna Barber,

CEO, Service Women's Action Network

Easterseals_Bram_FAV_SB904Uploaded by: Bram, Larry



Testimony to SUPPORT SB 904 Larry Bram, Senior Vice President Easterseals DC MD VA

Dear Chair Kelley, Vice Chair Feldman and members of the committee:

For the record, my name is Larry Bram and I am a Senior Vice President for Easterseals DC MD VA. For 100 years, Easterseals has been making profound, positive differences in the lives of people of all ages with disabilities, special needs, military backgrounds and their families. We urge the committee to support Senate Bill 904 to establish the Sheila E. Hixson Behavioral Health Services Matching Grant Program to ensure that behavioral health providers who serve veterans and service members have adequate resources to provide these critical services.

There is great need for behavioral health services among veterans, service members and their families in Maryland. There are approximately 399,000 veterans living in Maryland, of which an estimated 24,000 have been deployed to Iraq or Afghanistan. Across the state, approximately 10,000 veterans are dealing with post-traumatic stress or major depression. We know that veterans comprise 18% of all deaths by suicide in Maryland and this group is twice as likely as non-veterans to die by suicide. 12.4% of military suicides are by former National Guard and Reserve members who were never federally activated and therefore, not eligible for care by the VA.

We are honored that Sheila Hixson has allowed the bill to be named in her honor. As you know, her son was a Marine who, unfortunately, ended his own life. Delegate Hixson was a big supporter of this bill when it was first conceived.

We are all aware that the current capacity of government agencies cannot adequately address the behavioral health needs of our veterans and service members. Community providers—like Easterseals—help fill in the gaps in behavioral health services for veterans. And we are pleased that many organizations have joined to support the bill. A number have submitted letters of support or written testimony that is included in your packets. These organizations include a diverse variety of organizations, including NAMI; McVets, which helps homeless veterans in Baltimore, the Warrior Canine Connection, and the Anxiety and Depression Association of America (ADAA).

While changing and saving lives is our primary mission, our early intervention and evidence-based treatment is helping to dramatically reduce the longer-term costs of care for veterans and

military families. According to a recent Rand study, the long-term costs for PTSD and major depression in Maryland veterans ranges from \$130-\$200 million. The study estimates that early intervention with evidence-based treatments could save Maryland \$35-\$53 million over two years. This is a fantastic return on investment.

SB 904 is modeled after a law enacted by the Texas Legislature in 2015 (SB55), which provides \$20 million per year for veteran behavioral health care. SB 904 requests the governor *may* fund the program up to an annual budget of \$2.5 million to fund community-based veteran behavioral healthcare in Maryland. In this difficult budget year, we are suggesting that you pass the legislation to create the program and we can continue to work to get it funded. All state funds will be leveraged one-to-one with additional private funds, providing up to \$5 million per year in much needed services. The impact of this support will be dramatic and will provide a modicum of financial stability for the many nonprofit organizations serving this population.

SB 904 is an important and highly cost-effective opportunity to honor the service of veterans and their families as they seek to reintegrate into society and contribute to their communities. We urge the committee to submit a favorable report on SB 904 to change and save the lives of more veterans, their families, and the families of active duty service members in Maryland.

EasterSeals_FAV_SB904Uploaded by: DC MD VA, Easter Seals



Maryland SB904/HB1515: The Sheila E. Hixson Behavioral Health Services Matching Grant Program for Service Members and Veterans

Why this Bill is needed

Community mental health care is vital to the veteran and military family population. Not all veterans are eligible for VA care and the VA does not see family members. In addition, the DoD is faced with ongoing mental health provider shortages and thus many military treatment facilities are sending military family members and veterans to the community for care (National Defense Authorization Act (NDAA) 2020). It is vital that these community-based organizations remain healthy and financially sustainable.

Basic Facts

- 399,000 veterans live in Maryland¹
- 24,000 Marylanders have been deployed to Iraq or Afghanistan²
- 10,000 Maryland veterans are dealing with post-traumatic stress or major depression³
- Veterans comprise 18% of all deaths by suicide in Maryland and this group is twice as likely as non-veterans to die by suicide⁴
- 12.4% of all military suicides are by former National Guard and Reserve members who were never federally activated and therefore, not eligible for VA services⁵
- According to a recent Rand study, the long-term costs for PTSD and major depression in Maryland veterans ranges between \$130-\$200 million. The study estimates that early intervention with evidence-based treatments could save Maryland \$35-\$53 million over two years⁶

¹ Maryland Department of Veterans Affairs

² U.S. Department of Defense

³ U.S. Department of Defense

⁴ VA National Suicide Data Report 2005–2016, (Office of Mental Health and Suicide Prevention), September 2018

⁵ U.S. Department of Veterans Affairs, 2019 National Veteran Suicide Prevention Annual Report

⁶ Tannielian, Terri and Jaycox, Lisa, editors, *Invisible Wounds of War: Psychological and Cognitive Injuries, Their Consequences, and Services to Assist Recovery* (RAND Corporation, Santa Monica, CA), 2018

Easterseals Military Family Clinic

- Total number of Marylanders served (since 08/17): 540
 - O Veterans: 282
 - (includes 87 from National Guard & Reserves)
 - Active Duty: 17 Adult Family Members: 178 Children: 63 45.7% o Male: o Female 53.9% o Transgender/Unknown <1%
- More than 5,000 clinical hours of service provided to Marylanders (since 08/17)
- 16 employees, including psychologists, social workers, psychiatrist, case manager, intake coordinator, and outreach manager
- Services:
 - o In Clinic and Telehealth mental health care (individuals, family, couples, group)
 - Free childcare for clients during their therapy session
 - Case Management
 - Medication Management
 - Food Pantry for clients
 - o Transportation assistance for clients to come to therapy
 - o Educational Classes and Workshops (financial literacy, legal clinic, disability claims assistance, yoga, home buying seminar, toastmasters)

Outcomes:

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0	Clients felt that their needs were met during therapy:	90%
0	Clients that met their therapy goals upon discharge:	74%
0	Satisfaction at being seen in timely manner	100%
0	Clients were satisfied with the quality	100%
0	Clients would recommend the clinic:	90%

- Major Referral sources
 - VA Medical Centers
 - o Walter Reed National Military Medical Center
 - o Family & Friends
 - Online Searches

LCPCM_FAV_SB 904 Uploaded by: Faulkner, Rachael



Committee: Senate Finance Committee

Bill Number: Senate Bill 904

Title: Sheila E. Hixson Behavioral Health Services Matching Grant Program for Service

Members and Veterans – Establishment

Hearing Date: February 18, 2020

Position: Support

The Licensed Clinical Professional Counselors of Maryland (LCPCM) strongly supports Senate Bill 904 – Sheila E. Hixson Behavioral Health Services Matching Grant Program for Service Members and Veterans - Establishment. This bill establishes a grant program within the Maryland Department of Health to expand community behavioral services to veterans and their families.

If passed, this grant program would establish a mechanism for licensed clinical professional counselors (LCPCs) to provide mental health services to active duty military personnel, veterans, and their dependents. Currently, federal rules for the Department of Veterans Affairs and TRICARE do not permit the independent practice of LCPCs when providing mental health services. These outdated rules are in contradiction to the majority of states, including Maryland, which permit LCPCs to practice independently.

Unfortunately, these federal restrictions have prohibited access for active duty military and veterans seeking mental health treatment even as suicide rates among veterans remains high and provider capacity is limited.

Thank you for your consideration of our testimony, and we urge a favorable vote. If we can provide any further information, please contact Rachael faulkner at rfaulkner@policypartners.net or 410-693-4000.

MHA_FAV_SB904 Uploaded by: Frazee, Brian



February 18, 2020

To: The Honorable Delores G. Kelley, Chairman Senate Finance Committee

From: Brian Frazee, Vice President, Government Affairs Maryland Hospital Association

Re: Letter of Support- Senate Bill 904 - Sheila E. Hixson Behavioral Health Services Matching Grant Program for Service Members and Veterans – Establishment

Dear Chairman Kelley:

On behalf of the Maryland Hospital Association's (MHA) 61 member hospitals and health systems, we appreciate the opportunity to comment on Senate Bill 904.

Maryland is home to nearly 30,000 active-duty military personnel and about 371,000 military veterans. Research shows those who bravely serve in the military are, sadly, more likely to suffer from certain health problems, including chronic pain, substance use disorders, and mental health concerns, such as depression and post-traumatic stress.

Any of these conditions can lead to issues such as homelessness or suicide, which we know affect the veteran community.

Maryland's hospitals and health systems want to ensure those who served receive the care and support they need—during and after their service.

However, data show just over one-third of Maryland's veterans utilized the Veterans Administration health care system in 2017. Yet, we know the need is greater.

SB 904 would expand veterans' access to care by establishing the Sheila E. Hixson Behavioral Health Services Matching Grant Program for Service Members and Veterans. The program, overseen by the Maryland Department of Health, would provide matching grants to eligible nonprofit organizations through a competitive award process.

The programs and resources funded through the grants will go a long way toward improving health outcomes for veterans in our communities.

For more information, please contact: Brian Frazee Bfrazee@mhaonline.org

LATE - PatrickGuibao_FAV_SB904Uploaded by: Guibao, Patrick



1020 Wallace Road Crownsville MD 21032-1318

443.949.6322 patguibao@icloud.com

STATEMENT IN SUPPORT FOR SENATE BILL 904 – SHEILA E. HIXSON BEHAVIORAL HEALTH SERVICES MATCHING GRANT PROGRAM for SERVICE MEMBERS and VETERANS – ESTABLISHMENT

The American Legion Department of Maryland now serving in its second century in communities throughout Maryland strongly supports Senate Bill 904 now before the Budget and Taxation Committee.

This bill, providing a funding grant to local community service organizations is a sound, fundamental measure which hopefully will stem the rampant use of illegal drugs and opioids among our returning service personnel and, further, could reduce the tragic number of suicides—currently estimated at 22 per day across the nation by the U.S. Department of Veterans Affairs.

SB 904 per the *Fiscal and Policy Note* accompanying the bill would provide matching grants to local not-for-profit organizations serving the behavioral needs of their community to tailor recovery programs to veterans in area concerning mental health and substance use and abuse treatment.

Some funds used to support the programs could be minimized by the requirement for grantees to bill third parties such as insurance firms and Medicaid.

Presently there are more than 29,500 active-duty personnel assigned here in our State and an estimated 371,000 veterans who live in Maryland. Veterans, recently returned from combat areas and Vietnam era, are more likely to suffer from a variety of health problems including chronic pain, substance use disorders, chemical exposure problems and mental health issues.

It is these persons SB 904 could help in a direct, concise manner with the goal of returning to their respective communities as a whole person.

In closing, The American Legion representing over 48,000 men and women in our armed forces, veterans who have served in all wars and conflicts since 1917 and their families—all Maryland residents—believes SB 904 is the first step in achieving a comprehensive recovery program for active service, veterans and their dependent families and earnestly and respectfully ask for a favorable report on this bill and applaud Senator Smith for his recent

SENATE BILL 904 Favorable Position Page 2

service to his country and his compassion for his fellow service personnel, veterans and their families.

Yours, respectfully

Patrick Guibao

Patrick J. Guibao Chair THE AMERICAN LEGION Department of Maryland Legislative Commission

CornerstoneMontgomery_FAV_SB904Uploaded by: Gunthrie, Cari



February 8, 2020

To Whom It May Concern,

We are writing in support of the Sheila E. Hixson Behavioral Health Services Matching Grant Program for Service Members & Veterans (SB0904/HB1515) that calls for the creation of a state fund to provide matching grants to community-based organizations providing evidence-based behavioral health treatments for service members (including the Guard and Reserves), veterans, and their family members. There is great need for behavioral health services among veterans, service members and their families in Maryland. There are approximately 399,000 veterans living in Maryland, of which an estimated 24,000 have been deployed to Iraq or Afghanistan. Across the state, approximately 10,000 veterans are dealing with post-traumatic stress or major depression. We know that veterans comprise 18% of all deaths by suicide in Maryland and this group is twice as likely as non-veterans to die by suicide. Community-based organizations play a crucial role in providing timely, evidence-based services that fill the existing gaps in the VA system.

Cornerstone Montgomery is the largest and most comprehensive provider of behavioral health services in Montgomery County, MD. Each year we serve more than 2,200 individuals. We specialize in the provision of comprehensive, community- and evidence-based mental health and co-occurring mental health and substance use disorder treatments and interventions. Access to timely evidence-based care is a constant issue; one that is exacerbated for veterans and their families. Having a strong network of community-based organizations able to provide such care is critical.

The Sheila E. Hixson Behavioral Health Services Matching Grant Program goes a long way towards solving the problem. We encourage its passage.

Sincerely,

Cari Guthrie Cho, LCSW-C

Can farthuillo

President & CEO

ADAA_FAV_SB904 Uploaded by: Gurley, Susan



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February 8, 2020

To whom it may concern,

We are writing in support of the Sheila E. Hixson Behavioral Health Services Matching Grant Program for Service Members & Veterans (SB0904/HB1515) that calls for the creation of a state fund to provide matching grants to community-based organizations providing evidence-based behavioral health treatments for service members (including the Guard and Reserves), veterans, and their family members. There is great need for behavioral health services among veterans, service members and their families in Maryland. There are approximately 399,000 veterans living in Maryland, of which an estimated 24,000 have been deployed to Iraq or Afghanistan. Across the state, approximately 10,000 veterans are dealing with post-traumatic stress or major depression. We know that veterans comprise 18% of all deaths by suicide in Maryland and this group is twice as likely as non-veterans to die by suicide. Community-based organizations play a crucial role in providing timely, evidence-based services that fill the existing gaps in the VA system.

Founded in 1979, the Anxiety and Depression Association of America (ADAA) is an international nonprofit organization dedicated to the prevention, treatment, and cure of anxiety, depression, OCD, PTSD, and co-occurring disorders through education, practice, and research. With more than 1,800 professional mental health ADAA is a leader in education, training, and research. More than 11 million people from around the world visit the ADAA website annually (and click on more than 38,000,000 pages) to find current treatment and evidence-based research information and to access free resources and support. ADAA's member base includes many of the country's leading PTSD researchers and clinicians. The ADAA website works with its members to provide cutting-edge information about PTSD through website content, blog posts, webinars, podcasts, informational brochures, and links to important community resources for those struggling with PTSD. ADAA also convenes an annual conference with more than 140 sessions focused on sharing current research and treatment advances for anxiety disorders, depression and PTSD. 1,300 mental health professionals from across the US and around the globe attend to share, network and learn.

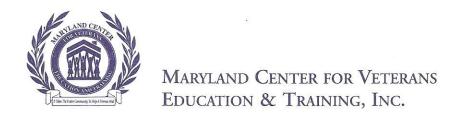
The VA clearly has not been able to adequately meet this growing need. Having a strong network of community-based organizations that understand military culture and in particular, the needs of women, is critical. The Sheila E. Hixson Behavioral Health Services Matching Grant Program is a step towards solving the problem and would position Maryland as a national leader in caring for its veterans and military family members. We encourage its passage.

Sincerely,

Susan K. Gurley, JD Executive Director

${\bf MDCenter for Veterans Education and Training_FAV_SB904}$

Uploaded by: Kendrick, Jeffery



Our Mission is to provide homeless veterans and other veterans in need with comprehensive services that will enable them to rejoin their communities as productive citizens.

February 13, 2020

To whom it may concern,

We are writing in support of the Sheila E. Hixson Behavioral Health Services Matching Grant Program for Service Members & Veterans (SB0904/HB1515) that calls for the creation of a state fund to provide matching grants to community-based organizations providing evidence-based behavioral health treatments for service members (including the Guard and Reserves), veterans, and their family members. There is great need for behavioral health services among veterans, service members and their families in Maryland. There are approximately 399,000 veterans living in Maryland, of which an estimated 24,000 have been deployed to Iraq or Afghanistan. Across the state, approximately 10,000 veterans are dealing with post-traumatic stress or major depression. We know that veterans comprise 18% of all deaths by suicide in Maryland and this group is twice as likely as non-veterans to die by suicide. Community-based organizations play a crucial role in providing timely, evidence-based services that fill the existing gaps in the VA system.

The Maryland Center for Veterans Education and Training, Inc. (MCVET), has seen firsthand the devasting effects of lack of behavioral health services for those of have served this country; resulting in mental trauma, along with drug and alcohol addiction. Our mission of providing comprehensive services specifically to the homeless veteran population for the past twenty-five years has resulted in over 70% of enrollees becoming housed and employed. MCVET's three housing venues, along with on-site Case Management, Drug and Alcohol Treatment groups, and mental health counselors have become a staple in the Maryland community. The need for state procured federal funding will allow similar minded organizations the ability to continue to meet the needs of the military member and their family.

The Sheila E. Hixson Behavioral Health Services Matching Grant Program goes a long way towards solving the problem. We encourage its passage.

Sincerely,

Jeffery L. Kendrick, USAF (Ret.)

Executive Director

Maryland Center for Veterans Education and Training, Inc.



MHAMD_FAV_SB904 Uploaded by: Martin, Dan



Heaver Plaza 1301 York Road, #505 Lutherville, MD 21093 phone 443.901.1550 fax 443.901.0038 www.mhamd.org

Senate Bill 904 Sheila E. Hixson Behavioral Health Services Matching Grant Program for Service Members and Veterans – Establishment

Finance Committee February 18, 2020 **Position: SUPPORT**

The Mental Health Association of Maryland is a nonprofit education and advocacy organization that brings together consumers, families, clinicians, advocates and concerned citizens for unified action in all aspects of mental health, mental illness and substance use. We appreciate this opportunity to present testimony in support of Senate Bill 904.

SB 904 would establish a Behavioral Health Services Matching Grant Program in the Maryland Department of Health to support local behavioral health programs for service members, veterans, and their families.

Statistics related to the prevalence of mental health disorders among U.S. veterans are startling. According to the Substance Abuse and Mental Health Services Administration (SAMHSA), approximately 18.5 percent of service members returning from Iraq or Afghanistan have post-traumatic stress disorder or depression, and 19.5 percent report experiencing a traumatic brain injury during deployment. Approximately 50 percent of returning service members who need treatment for mental health conditions seek it, but only half who receive treatment receive adequate care.

Of particular concern is the high rate of veteran suicide:

- Veterans account for 18 percent of all suicide deaths among U.S. adults
- On average, one U.S. veteran dies by suicide nearly every hour
- Veteran suicides in Maryland average over 100 per year (308 total from 2015-2017)

In 2018, it was projected that 380,000 veterans would call Maryland home¹, and in 2017, a total of 47,484 active duty serviceman and reserve members were reported to reside in Maryland². It is essential that we ensure these individuals and their families have access to behavioral health services as needed.

For these reasons, MHAMD supports SB 904 and urges a favorable report.

https://veterans.maryland.gov/2013-maryland-veteran-population-map/

² http://www.governing.com/gov-data/public-workforce-salaries/military-civilian-active-duty-employee-workforce-numbers-by-state.html

Brooke Milewski_FAV_SB904 Uploaded by: Milewski, Brooke

Senate Bill 904 - Sheila E. Hixson Behavioral Health Services Matching Grant Program for Service Members and Veterans - Establishment - SUPPORT

Dear Chair Kelley, Vice Chair Feldman and members of the committee:

For the record, I am Brooke Milewski, a military spouse. I am here to testify on behalf of SB904. Mental health and PTSD are real issues, but society still often looks down on you if you suffer from one or more of these health conditions. Unfortunately, for the military community this is all too common. It is something that soldiers, spouses, and children deal with on a daily basis. It affects the whole family, not just the person dealing with PTSD or mental illness.

My husband is a Marine veteran who was deployed two times to Iraq. He saw the worst of the worst, saw his friends, his brothers, his soldiers die in front of him, sometimes while holding them in his arms. He never thought he would make it home alive, let alone to have a family.

Gratefully, he did come home, but we were faced with challenges. When he came home he tried to have the mentality that everything he saw and had to do was a "job" and he could put it all in the back of his mind and move on. As many of us know, that can only last for so long. On top of coming back from war he had to settle back into society and in a world that was quite different from what he had known for two plus years.

Not only did the reality come head-on that he had PTSD, but when he retired from the Marines he felt a sense of loss over what would be his next steps. We realized that it was critical for him to receive therapy along with myself so that we could move forward together. I saw the changes in him, the fear someone was following us, the being on edge, always looking around when we were out as if we were going to get attacked, the list goes on.

I knew for us to be successful, therapy was necessary. Through the process of looking for therapist we found that many did not take Tricare, if they did take Tricare they were not qualified for what we needed, and the best of the best started to decline Tricare because the payment rates were so low. It was hard for my husband to open up, and when we finally found a therapist who he felt comfortable with, they had to start charging us a private rate as well, because Tricare was only offering them \$25.00 per session. We could not afford the cost of \$100.00 plus dollars on a weekly occasion.

Due to the high costs of therapy and the ongoing inconveniences of accessing it, we eventually stopped treatment. I saw great improvement in my husband during therapy, but the cost was putting more stress on us than actually helping.

A dream we both had was to have a family, we were beyond thrilled to find out we were expecting a baby, but never could have imagined the challenges that would come our way. My pregnancy was beyond complicated and scary at times, I was sick the

whole 9 months and was put on bed rest. Bed rest did not work and I was rushed to the hospital to be induced.

The delivery was nothing that what we could have planned for. Long and short, I nearly died on June 3rd, 2016. The delivery looked like a war scene and that brought back my husband to his days in Iraq, I knew I was dying.....I knew what was going on around me was not normal, I saw the scare in everyone's faces, I took what I thought was one last look at my daughter, I woke hours later.....

I am beyond grateful & blessed to be here today, but it does not come with challenges. I was put on disability for 6 months while I recovered (this meant my parents moving in with us, medical care, caregivers etc.), my husband had to deal with everything he saw and went through during my pregnancy and delivery that brought back so many awful and scary memories.

I was diagnosed with PTSD because of my pregnancy and delivery. I also suffered flashbacks, night terrors, severe anxiety, fear, you name it. I got a glimpse into what my husband and other soldiers have and are dealing with for years.

I realized we need to end the stigma of mental health, the negativity around PTSD. There needs to be more clinics at no cost that have therapists qualified to treat the military family, and there needs to be more telehealth for those that can't leave the house.

PTSD is very real; it can debilitate to you to the core. People don't often understand the true impact it has on a person until they live it day-by-day. I am beyond grateful that my husband and myself have a clinic that we can go to at no charge, that is close by, and for days my husband feels more comfortable he has the option for telehealth. Knowing that I can receive therapy as an individual and with my husband has been a gift.

When we go to our therapy appointments, we are not thinking how much this is going to cost us out of pocket & what are we going to have to eliminate to afford this, we can really focus on getting better and our mental health.

Therapy that is convenient, at no cost or reduced cost with qualified therapist and offering telehealth has been a blessing to our family. We can focus on our beautiful daughter and the joys of having a family all while healing and getting healthy mentally. Without these services, my family would not be where we are today.

I can only help that this testimony will help provide better therapy and health services for our military, veterans, and their families. I urge a favorable report on SB904.

Sincerely,

Brooke Milewski

NAMI_FAV_SB904
Uploaded by: national alliance on mental illness



February 18, 2020

Senate Bill 904 - Sheila E. Hixson Behavioral Health Services Matching Grant Program for Service Members and Veterans - Establishment - SUPPORT

Chair Kelley, Vice Chair Feldman, and members of the Senate Finance Committee:

The National Alliance on Mental Illness, Maryland and our 11 local affiliates across the state represent a statewide network of more than 45,000 families, individuals, community-based organizations and service providers. NAMI Maryland is dedicated to providing education, support and advocacy for persons with mental illnesses, their families and the wider community.

NAMI Maryland strongly supports legislation that would establish the Behavioral Health Services Matching Grant Program for Service Members and Veterans to ensure that behavioral health providers who serve veterans and service members have adequate resources to provide these critical services.

There are nearly 400,000 veterans in Maryland. As you've heard today, the need for behavioral health services to treat issues like post-traumatic stress disorder, depression, and anxiety is incredible. We know that as death by suicide is on the rise, veterans comprise 18% of all deaths by suicide in Maryland – meaning Maryland's veterans are twice as likely to die by suicide.

NAMI Maryland provides FREE training and services for veterans. Anecdotally, I can report that demand for our veteran-focused peer programs has increased exponentially in the last few months. Applications by veterans to be trained to deliver these effective programs have tripled in the last four months.

One of the programs we offer to support veterans, military and their families is NAMI Homefront. This is a free, inperson, educational program for families, caregivers and friends of military service members and veterans with mental health conditions.

Based on the nationally recognized NAMI Family-to-Family program, NAMI Homefront is designed to address the unique needs of family, caregivers and friends of those who have served or are currently serving our country. The program is taught by trained family members of service members/veterans with mental health conditions.

NAMI Maryland brings veterans together to provide hope for all people affected by mental health conditions. This experience provides the opportunity for mutual support and shared positive impact. By experiencing compassion and reinforcement from people who relate to a veteran's lived experience, programs like NAMI Homefront teaches veterans and their families how to:

- Learn to care for yourself, including managing your stress
- Support your family member with compassion
- Identify and access federal, state and local services
- Stay informed on the latest research and information on mental health, including posttraumatic stress disorder, traumatic brain injury, anxiety, depression and substance use
- Understand current treatments and evidence-based therapies
- Navigate the challenges and impact of mental health conditions on the entire family
- Manage a crisis, solve problems and communicate effectively

Some self-reported feedback on these programs includes:

"I realized I saw signs and symptoms of PTSD but did not know how to handle my loved one - I know better how to handle situations."

"You realize that he will never be the same having been through war. I learned how to treat him more as an adult than as a hurt child."— Mother of a Veteran after graduating from a NAMI Family-to-Family class held at a VA clinic.

Nonprofit programming like ours is sustained in part by grant funding. For the past 2 years, NAMI Maryland has partnered with funders to grow our outreach to veterans and we know we can do more. In light of the recent news about the state budget and the cuts the General Assembly is facing, we recognize the difficulty of setting aside such a large amount of funding. However, any investment in the provision of behavioral health services for our veterans would truly go a long way.

Like many health conditions, early intervention often saves on health care costs, and in this case, could save lives.

Thank you to Senator Smith for introducing this bill and we ask for a favorable report on Senate Bill 904.

22MarchforLife_FAV_SB904Uploaded by: Shreiner, Terry



Terry Shreiner

Founder/President

Ph: (410) 474-6648

Em: tshreiner@22marchforlifeinc.com

February 8, 2020

To whom it may concern,

We are writing in support of the Sheila E. Hixson Behavioral Health Services Matching Grant Program for Service Members & Veterans (SB0904/HB1515) that calls for the creation of a state fund to provide matching grants to community-based organizations providing evidence-based behavioral health treatments for service members (including the Guard and Reserves), veterans, and their family members. There is great need for behavioral health services among veterans, service members and their families in Maryland. There are approximately 399,000 veterans living in Maryland, of which an estimated 24,000 have been deployed to Iraq or Afghanistan. Across the state, approximately 10,000 veterans are dealing with post-traumatic stress or major depression. We know that veterans comprise 18% of all deaths by suicide in Maryland and this group is twice as likely as non-veterans to die by suicide. Community-based organizations play a crucial role in providing timely, evidence-based services that fill the existing gaps in the VA system.

22 March For Life Inc, is Nonprofit 501c3 organization that focuses on Veterans and First Responder suicide awareness and prevention. Our organization tackles the issue of suicide from many angles with the goal of immediate relief to help those who suffer from PTSD and suicidal thoughts. We provide resource connections and guidance.

The VA clearly has not been able to adequately meet this growing need. Having a strong network of community-based organizations that understand military culture and in particular, the needs of women, is critical. The Sheila E. Hixson Behavioral Health Services Matching Grant Program is a step towards solving the problem. We strongly encourage its passage.

Sincerely,

Terry Shreiner, Jr. CEO

Easterseals_Walden_FAV_SB904Uploaded by: Walden, Dr. Tracy Neal



Testimony to SUPPORT SB 904 Tracy Neal-Walden, Ph.D., Clinic Director & Senior Vice President, Easterseals Military Family Clinic

Dear Chair Kelley, Vice Chair Feldman and members of the committee:

For 100 years, Easterseals has been making profound, positive differences in the lives of people of all ages with disabilities, special needs, military backgrounds and their families. In September 2017, we opened the Easterseals Military Family Clinic to provide low or no-cost behavioral health services to veterans, their family members and the family members of active duty service members. We urge the committee to support Senate Bill 904 to establish the Sheila E. Hixson Behavioral Health Services Matching Grant Program to ensure that behavioral health providers who serve veterans and service members have adequate resources to provide these critical services.

There is great need for behavioral health services among veterans, service members and their families in Maryland. There are approximately 399,000 veterans living in Maryland, of which an estimated 24,000 have been deployed to Iraq or Afghanistan. Across the state, approximately 10,000 veterans are dealing with post-traumatic stress or major depression. We know that veterans comprise 18% of all deaths by suicide in Maryland and this group is twice as likely as non-veterans to die by suicide. 12.4% of military suicides are by former National Guard and Reserve members who were never federally activated and therefore, not eligible for VA services.

While the statistics are staggering, I see the faces and stories behind the numbers every day. As a licensed clinical psychologist, a retired Colonel who served in the Air Force for 24 years, and the Director of the Easterseals Military Family Clinic, I see the symptoms and challenges our veterans, service members, and their families are facing. Nearly half of the veteran and family member clients seen by my team of clinicians, many of whom are also veterans, are diagnosed with post-traumatic stress, depression or anxiety. These individuals and families have served our country, and we need to ensure that they receive the help and support they need to reach their potential and live meaningful lives.

We are all aware that the current capacity of government agencies cannot adequately address the behavioral health needs of our veterans and service members. There are often long waiting periods to get services at Veterans Administration (VA) facilities; depending on their discharge status, veterans may not be eligible to be seen by the VA; and family members of veterans are not serviced by the VA. For the family members of active duty military, the number of providers who accept military insurance may be limited, resulting in long waits for services. In addition, many healthcare providers may not have military cultural competency especially in regards to women veterans which is the fastest growing demographic in the military.

Community-based organizations like the Easterseals Military Family Clinic provide critical services to enhance available treatment resources and reduce the barriers to care. We are

¹ U.S. Department of Defense

² VA National Suicide Data Report 2005–2016, (Office of Mental Health and Suicide Prevention), September 2018

³ US Department of Veterans Affairs, 2019 *National Veteran Suicide Prevention Annual Report*

able to see patients within one week, and even on the same day if needed. We ensure that veterans in crisis receive immediate services, and we provide case management for veterans and family members who need additional support. We are changing and saving lives every day. In the words of one of our clients:

"I would like to share and show my gratitude to the [Easterseals Clinic]. I have been coming here for over two or three months and [was] not sure of how it would all work out. But I am very glad that I made the call when I did, because my outlook on life and myself was pretty grim to say the very least. If I would not have found you all my next alternative was suicide for sure. But the Clinic has given the necessary place to heal and has given me the tools to fight back the demons in my own head and life. I will be forever indebted to and grateful for finding you all. My life will never be the same!"

—Stephen U.

While changing and saving lives is our primary mission, our early intervention and evidence-based treatment is helping to reduce the longer-term costs of care for veterans and military families. According to a recent Rand study,⁴ the long-term costs for PTSD and major depression in Maryland veterans ranges from \$130-\$200 million. The study estimates that early intervention with evidence-based treatments could save Maryland \$35-\$53 million over two years.

SB 904 is modeled after a law enacted by the Texas Legislature in 2015 (SB55), which provides \$20 million per year for veteran behavioral health care. SB 904 requests the governor <u>may</u> fund the program up to an annual budget of \$2.5 million to fund community-based veteran behavioral healthcare in Maryland. In this difficult budget year, we are suggesting that you pass the legislation to create the program and we can continue to work to get it funded. All state funds will be leveraged one-to-one with additional private funds, providing up to \$5 million per year in much needed services. The impact of this support will be dramatic and will provide a modicum of financial stability for the many nonprofit organizations serving this population.

In the 30 months since the Easterseals clinic has opened, we have seen over 540 clients from all regions of the state, and that number grows each week. Lamar Winslow, a former Marine Corps Captain served three tours of duty in Iraq in 2003, 2006, and 2007. He shares his story here: http://bit.ly/Easterseals-Lamar

"By the time I went to the Easterseals Clinic, I was in the middle of chaos [due to PTSD]. Everything was in shambles. My work life, my financial life, my relationship with my (now) wife, my relationship with family and friends...the clinicians gave me the gift of a life that's worth living." – Lamar Winslow

SB 904 is an important and highly cost-effective opportunity to honor the service of veterans and their families as they seek to reintegrate into society and contribute to their communities. We urge the committee to submit a favorable report on SB 904 to change and save the lives of more veterans, their families, and the families of active duty service members in Maryland.

Very Respectfully, Tracy Neal-Walden

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⁴ Tannielian, Terri and Jaycox, Lisa, editors, Invisible Wounds of War: Psychological and Cognitive Injuries, Their Consequences, and Services to Assist Recovery (RAND Corporation, Santa Monica, CA), 2018

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ARCHDIOCESE OF BALTIMORE † ARCHDIOCESE OF WASHINGTON † DIOCESE OF WILMINGTON

February 18, 2020

SB 904

Sheila E. Hixson Behavioral Health Services Matching Grant Program for Service Members and Veterans – Establishment

Senate Finance Committee Senate Budget and Taxation Committee

Position: Support

The Maryland Catholic Conference ("Conference") represents the public policy interests of the three Roman Catholic (arch)dioceses serving Maryland: the Archdiocese of Baltimore, the Archdiocese of Washington, and the Diocese of Wilmington.

Senate Bill 904 establishes the Sheila E. Hixson Behavioral Health Services Matching Grant Program for Service Members and Veterans within the Maryland Department of Health, and states that the Governor may include \$2.5 million in the annual budget for the program.

Behavioral health issues, including depression and suicide, are public health challenges that causes immeasurable pain among individuals, families, and communities across the country. This is an urgent issue that the Maryland General Assembly and citizens of Maryland must address, working to protect and help the men and women who have bravely fought and served our state and country.

Strengthening protective factors can help prevent suicide by promoting physical, mental, emotional, and spiritual wellness. For example, building the problem-solving skills and social support of service members transitioning from the military can help them better cope with future challenges as veterans. A focus on strengthening protective factors should be the norm rather than the exception. A complex challenge like addressing the behavioral health needs of service members, veterans, and their families will only be solved with a broad, coordinated approach that reaches across many sectors.

Former Delegate Sheila Hixson was a stalwart advocate for the needs of service members and veterans, especially those needing additional support after leaving active duty. It is only appropriate that a program to address these needs bears her name and legacy.

The Conference appreciates your consideration and, for these reasons, respectfully requests a favorable report on Senate Bill 904.

Yount_FAV_SB904 Uploaded by: Yount, Rick



14934 Schaeffer Rd.
Boyds, MD 20841
(301) 260.1111
warriorcanineconnection.org

February 13, 2020

To whom it may concern,

We are writing in support of the Sheila E. Hixson Behavioral Health Services Matching Grant Program for Service Members & Veterans (SB0904/HB1515) that calls for the creation of a state fund to provide matching grants to community-based organizations providing evidence-based behavioral health treatments for service members (including the Guard and Reserves), veterans, and their family members. There is great need for behavioral health services among veterans, service members and their families in Maryland. There are approximately 399,000 veterans living in Maryland, of which an estimated 24,000 have been deployed to Iraq or Afghanistan. Across the state, approximately 10,000 veterans are dealing with post-traumatic stress or major depression. We know that veterans comprise 18% of all deaths by suicide in Maryland and this group is twice as likely as non-veterans to die by suicide. Community-based organizations play a crucial role in providing timely, evidence-based services that fill the existing gaps in the VA system.

Warrior Canine Connection (WCC) is a Maryland based non-profit organization that serves Veterans from all eras whom have sustained physical and/or psychological injuries in defense of our country. WCC offers a unique integrated medicine modality where Veterans with invisible wounds learn to train service dogs for their fellow Veterans. The training process provides a healing mission for the Veteran trainers while providing well-trained service dogs for their battle buddies. This matching grant program would help us serve a great many more Veterans and their families.

Having a strong network of community-based organizations that understand military culture and in particular, the core value of the Warrior Ethos, is critical. The Sheila E. Hixson Behavioral Health Services Matching Grant Program is a step towards solving the problem. We encourage its passage.

Sincerely,

Rick Yount

Founder/Executive Director Warrior Canine Connection